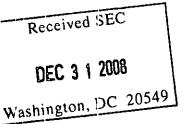
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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

í OMB A	PPROVAL					
OMB Number	3235-0076					
Expires:	December 31 2008					
Estimated average burden						
hours per response 16.00						



## TEMPORARY

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



Filing Under (Che Type of Filing:	cck box(es) that apply):  New Filing	☐ Rule 504 ☐ Amendment	Rule 505		Section 4(6)	ULOE
		A. BAS	SIC IDENTIFICA	ΓΙΟΝ DATA		
1. Enter the info	rmation requested about	the issuer				
1	check if this is an ame redit Select Fund, Lt		as changed, and ind	cate change.)		
Address of Exec 605 Third Avei	utive Offices tue, New York, NY 1		and Street, City, Sta		ephone Number (Including 2) 526-5904	g Area Code)
,	pal Business Operations Executive Offices)	(Number	and Street, City, Sta	te, Zip Code) Tel-	ephone Number (Including	g Area Code)
Brief Description	of Business Private Inv	estment Fund inves	sting in affiliated N	1aster Fund, Libe	rtyView Credit Select Fu	ınd, L.P.
Type of Business corporation business t	n limited p	artnership, already for		ner (please specify)	: Cayman Islands exposion	ROCESSED
	ed Date of Incorporation orporation or Organization	or Organization: [0 on: (Enter two-le	onth Year  6] [07]   Etter U.S. Postal Ser		ted	JAN 0 9 2009 VISON REUTER

#### GENERAL INSTRUCTIONS

Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that lave adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not

SEC 1972 (9-08)

required to respond unless the form displays a currently valid OMB control number.

1 of 8

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and	managing partne	er of partnership issuers.				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner	
Full Name (Last rame first, Alexander, Lisa	, if individual)					
Business or Residence Add Walkers SPV Limited, W	•	•		Cayman Island	s	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner	
Full Name (Last rame first, Rogers, Steven	, if individual)					
Business or Residence Add 605 Third Avenue, New Y	•	d Street, City, State, Zip	Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, Tweed, Alison	if individual)					
Business or Residence Addr Walkers SPV Limited, Wa	•		•	Cayman Island	s	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
full Name (Last name first,	if individual)					
Business or Residence Add	ress (Number an	d Street, City, State, Zip	Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last rame first,	if individual)	<u> </u>				
Business or Residence Addr	ress (Number and	d Street, City, State, Zip	Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last rame first,	if individual)					
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if individual)						
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code)			
	(Use bl	ank sheet, or copy and us	se additional copies of this	sheet, as necess	sary)	

						B. INFOR	MATION	ABOUT	OFFERI	NG				··	
1.	Has the issu	er sold, or	does the is	suer inten	d to sell, t	o non-accr	edited inv	estors in th	is offering	;?				Yes	No SZI
				Answ	er also in a	Annendix	Column 2	if filing u	nder I II O	F					$\boxtimes$
2.	Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?							\$1,000,0	00*						
* 51	ı bject to inci				•		•							-	
3.	Does the of	ering perm	nit joint ov	vnership o	fa single ı	ınit?	•••••				•••••			Yes	No
	Cara da Ca			°		1			<b>1</b> ′	41		••		Ø	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or															
	dealer only.	) persons i	o be lister	i ait assoc	nated pers	ons or suc	II a DIOKC	or ucater.	, уон тау	SCI IOIUI I	ne monn	ation for t	nat otoker of		
	iness or Resid Third Aven				reet, City,	State, Zip	Code)								
	me of Associa		or Dealer										-		
	tes in Which F		ed Has So	licited or I	ntends to	Solicit Pur	chasers								
	(Check	"All State	s" or chec	k indiviđu:	al States)								*********	🔯 All	States
					-										
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	(DE) [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Ful	Name (Last				נואן	[01]	[41]	[VA]	[WAJ		[WI]	[WI]			
Rus	siness or Resid	lence Add	ress (Num	her and Str	reet City	State 7in	Code)						<del></del>		
	Shield of Resid	ichee Add	1635 (114111		cci, city,	State, Zip									
Nar	me of Associa	ted Broker	or Dealer									• • • •	<del></del>		
Stan	tes in Which P	erson List	ed Has So	licited or I	ntends to S	Solicit Pure	chasers								
	(Check "All	States!" or	check indi	widual Sta	tan)									🗀 All	States
	(Check All	States or	CHECK III	viduai Sia	ies)	.,,,,,	*************	***************	***************************************	***************************************	***********			All	States
•	[AL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	(CT) [ME]	[DE] [MD]	[DC] [MA]	(FL) (MI)	[GA] [MN]	[HI] [MS]	[ID] [MO]		
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
•	[R.I]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Ful	1 Name (Last r	name tirst,	if individu	ıal)					<u> </u>		- :				
Buss	siness or Resid	ence Addi	ess (Numl	per and Str	ect, City,	State, Zip	Code)								
Nan	nt of Associat	ed Broker	or Dealer	- ·-					<del> </del>		·-··				
Stan	tes in Which P	erson List	ed Has So	icited or l	ntende to	Colicit Pur	hacerc						_		
Ju •	(Check "All							•••••			•••••	·····	,,	🔲 All	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	[11.]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV}	(OK) [WI]	[OR] [WY]	[PA] [PR]		
		-			_			-		-					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$500,000,000	\$34,119,914.11
	□ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Fartnership Interests	\$	<b>\$</b>
	Other (Specify)	•	
	\	\$	\$
	Total	\$ <u>500,000,000</u>	\$ <u>34,119,914.11</u>
	Answer also in Appendix, Column 3, if filing Under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings Under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	32	\$ <u>34,119,914.11</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		<u>-</u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	<u></u>	\$ <u>75,000</u>
	Accounting Fees		\$
	Engineering Fees	[	\$
	Sales Commissions (specify finder's fees separately)	[	\$
	Other Expenses (identify)	[	\$
	Total	🗵	\$ <u>75,000</u>
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ <u>499,925,000</u>

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~	OPPRDING DRICE	NUMBER	OF INVECTORS	EVDENCEC	AND USE OF PROCEEDS
١	OFFRKING PRICE.	. NUIVIBER	UP INVESTURS	. EXPENSES	AND USE OF PROCEEDS

5.	Indicate below the amount of the adjusted gross proce proposed to be used for each of the purposes shown, purpose is not known, furnish an estimate and check the estimate. The total of the payments listed must be proceeds to the issuer set forth in response to Part C —	If the amount for ar he box to the left of the qual the adjusted gro	ny he		
	F	<b>(</b>	Paymen Office Director Affilia	rs, s, &	Payments to Others
	Salaries and fees	••••••	🗆 \$		□ \$
	Furchase of real estate	•••••	🗆 \$		□ \$
	Furchase, rental or leasing and installation of machiner	y and equipment	🗆 \$	<del></del>	□ \$
	Construction or leasing of plant buildings and facilities	·	🗆 \$		□ \$
	Acquisition of other businesses (including the value involved in this offering that may be used in exchange of securities of another issuer pursuant to a merger)	e for the assets	🛘 \$		□ \$
	F.epayment of indebtedness		🗆 \$		□ \$
	Working capital		🗆 \$		□ \$
	Other (specify): Investment Capital		<b>⊠</b> \$ <u>499,925,0</u>	00	□ <b>\$</b>
	Column TotalsTotal Payments Listed (column totals added)		- + <u>*******</u>	<u>00</u> ⊠ \$ <u>499,92</u>	□ \$ 5,000
	D. FEDI	ERAL SIGNATURE			
followin	er has duly caused this notice to be signed by the undig signature constitutes an undertaking by the issuer to fits staff, the information furnished by the issuer to an	o furnish to the U.S.	Securities and Exc	hange Comm	ission, upon written
	Print or Type) View Credit Select Fund, Ltd.	Signature		ate /2/	23/08
	f Signer (Print or Type) Rogers	Title of Signer (Print Director	t or Type)	/	/
Γ		ATTENTION	-il-i-l-k (6	10 11 5 6 100	1
L	Intentional misstatements or omissions of fa	et constitute legeral crin	minal violations. (See	18 U.S.C. 100	1.)
	<del></del>			···	

E. STATE SIGNATURE							
Is any party described in 17 CFR 230.262 present provisions of such rule?NOT APPLICA	lly subject to any of the disqualification Yes No BLE						
. See	e Appendix, Column 5, for state response.						
2. The undersigned issuer hereby undertakes to furn (17 CFR 239.500) at such times as required by sta	nish to any state administrator of any state in which this notice is filed a notice on Form D ate law. NOT APPLICABLE						
3. The undersigned issuer hereby undertakes to furr offerees. NOT APPLICABLE	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. NOT APPLICABLE						
Offering Exemption (ULOE) of the state in w	r is familiar with the conditions that must be satisfied to be entitled to the Uniform limited hich this notice is filed and understands that the issuer claiming the availability of this se conditions have been satisfied. <b>NOT APPLICABLE</b>						
The issuer has read this notification and knows the corduly authorized person.	ntents to be true and has duly caused this notice to be signed on its behalf by the undersigned						
Issuer (Print or Type) LibertyView Credit Select Fund, Ltd.	Signature Date 10/23/06						
Name of Signer (Print or Type) Steven Rogers	Title of Signer (Print or Type) Director						

END

#### Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.